

CLAIMS ONLY							Application Number <div style="font-size: 2em; font-family: cursive;">10/548318</div>	Filing Date					
							Applicant(s)						
							* May be used for additional claims or amendments						
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*		*		
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	
1	1						51						
2		2					52						
3	1						53						
4		2					54						
5		1					55						
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Application Number

Filing Date

Applicant(s)

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